

# The NIH Record

## NINDS Seeks To Help More Patients With Rare Illness

By Norman Oliver

Kimberly Nelson, struggling with a neurological ailment that left her weak and clumsy at the end of the day, was being helped across the lobby of the Clinical Center by her parents. Suddenly the 14-year-old student from Florida stopped, stood unaided and began walking. Her dramatic recovery from 7 years of progressively worsening disability took place a little more than an hour after being treated by medical investigators at the National Institute of Neurological Disorders and Stroke.

As many as 20,000 other similarly disabled children and adults might be able to repeat Kimberly's feat and walk easily. Fewer than 200, however, are receiving treatment, according to Dr. John K. Fink, an NINDS neurogeneticist. Fink wants to find the rest—get them up on their feet again and get to the bottom of a biochemical mystery that may shed light on other neurological disorders.

Kimberly inherited a rare disorder called Segawa's dystonia. A chemical imbalance in her central nervous system affected her muscle control. Muscle contractions tilted her head to the left, pulled her left arm to her side and weakened her left leg. Unless corrected with the medication Sinemet the disease frequently confines patients to wheelchairs for at least part of the day.

"It's underrecognized, and it's now a treatable condition," Fink said. Named for the Japanese researcher who first described it in the mid-1970s, Segawa's dystonia has been found all over the world. Patients move from nearly normal ability in the morning to disabled in the afternoon.

Pointing to a rack of videotapes he has made of his patients, Fink said: "I can show you a child who looks for all the world like a cerebral palsy patient in a wheelchair. Then 2 weeks later, he's just running around. If someone were to tell me this, I wouldn't believe it. But I have seen it."

Like other patients with Segawa's dystonia, Kimberly came to NIH leaving behind a trail of puzzled experts. Many patients are told that they have an untreatable cerebral palsy. Others are given descriptive diagnoses such as spastic paraparesis. Some are told they have a psychological problem.

"Of the misdiagnoses, that one is probably the most damaging," Fink said. "If you tell a child, 'Well you can't walk and we wish you could walk, but it's not your fault,' that doesn't affect his self-esteem to the same degree as saying, 'You're lazy and you're just trying to frustrate your mother.'"

Most doctors are unfamiliar with dystonia,

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## Search Nears End

### Power, Policy Issues Footnote Final Meeting of the Committee To Enhance the NIH Director's Job

By Carla Garnett

Fresh fodder for debate emerged recently during the final meeting of the panel that was established to reshape and enhance the job of NIH director.

Slightly different from previous discussion, the tenor of the group's latest deliberations had little to do with compensation and lots to do with power and status. At stake was the position of the NIH director, and the perception of NIH within the hierarchy of the Public Health Service and the Department of Health and Human Services.

Major issues at the Apr. 25 meeting were two important but unrelated roles that, according to the panel, needed to be redefined: What part, if any, should the NIH director play in formulating national science policy and planning? And what purpose, if any, does the NIH director's advisory committee serve?

Three previous meetings of the 16-member

advisory committee on NIH, which includes former NIH director Dr. Donald Fredrickson and former NCI laboratory chief Dr. Maxine Singer as well as NIH acting director Dr. William Raub and NIAID director Dr. Anthony Fauci as advisors, have provided the following recommendations, some of which have already been implemented.

- The NIH director's salary should be more competitive with salaries of comparable academic posts.

- The NIH director's ability to recruit and retain staff should be bolstered by adjusting the salaries of such senior officials as institute directors and senior scientists.

- The NIH director's access to top-level DHHS officials has been improved with regularly scheduled meetings between Raub, DHHS secretary Dr. Louis Sullivan and assist-

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## R&W Association Celebrates 45th Anniversary at NIH

By Rich McManus

No, it doesn't sponsor a rifle and pistol club anymore and its garden club has lain fallow for years, but you can get just about anything else you want at NIH's R&W Association.

Those two initials, which stand for Recreation and Welfare, cover a world of activities, interests, people, items and events that help bind the campus into something approaching a community. For 45 years now (though some sources indicate the true number is only 43), R&W has been at the heart of NIH life.

"The most fun part of R&W is that it crosses all kinds of work lines," says Dr. Helen Gift, president of R&W since last year. "There's an incredible mixture of people. You have firemen, plumbers, janitors, doctors and secretaries all getting together."

Two out of every three of the 13,000 NIH employees on the Bethesda campus are card-carrying members of R&W, which, in addition to sponsoring some 22 clubs (sailing and skiing are the biggest), runs five stores (four here and one at NIEHS in North Carolina) and does roughly \$1.2 million in business annually.

Years ago, one of the most anticipated social events of the year for NIH'ers was a play by the R&W-sponsored theater group, known then as "The Hamsters." Masur Auditorium would be packed for these satirical



Randy Schools, general manager of R&W for the past 12 years, has turned the association into one of the nation's best employee services organizations. This year, he is also president of the National Employee Services and Recreation Association. He is also participating in Leadership Montgomery, a county program for upcoming leaders.

send-ups, written by employees, that were usually titled "Life at NIH."

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## SEGAWA'S DYSTONIA YIELDS TO THERAPY, NINDS RESEARCHERS FIND

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Fink explained. "When physicians see a person who has trouble with walking, they think of cerebral palsy," Fink said. "So it's unfamiliarity with dystonia and the resemblance to other conditions and the fluctuating nature of the symptoms that are most often missed."

Fink explained that Segawa's dystonia is so rare it wasn't covered in the neurology textbooks he used during his residency. Now, however, he eagerly discusses its treatment and possible causes.

"What's the excitement about this kind of dystonia?" Fink asked. "It's really twofold. You're finding patients and changing their lives. There is nothing else like that. The idea that there are other children or adults out there every day in wheelchairs just waiting to be helped keeps you going."

"The second thing is the biochemical excitement. If we crack this, then it will be a model system for other dominantly inherited diseases."

Patients with Segawa's have inherited a faulty gene from one of their parents. But not all persons with the gene will have recognizable symptoms or have them with the same severity. A parent may have no recognizable symptoms yet have an affected child. Only one parent needs to have the gene to pass it on to a child and each child has a 50-50 chance of inheriting the disorder.

The dramatic effect Sinemet has on Segawa's dystonia patients is giving Fink important clues to the chemical imbalances in the disorder. The body converts ingredients in Sinemet

into the neurotransmitter dopamine, one of the chemicals that helps nerve cells communicate.

"The response to Sinemet is rapid," Fink said, "Within 48 hours, often within 2 or 3 hours, you'll see a response. The person will be improved."

Fink noted that the dose of Sinemet used is very low and that its effectiveness doesn't wear off over time. The persistence of the dopamine effect for years suggests to Fink that Segawa's dystonia is not a degenerative condition. In addition, a brain autopsy on a Segawa's patient who died from pneumonia has revealed the normal number of dopamine-producing nerve cells. This makes Segawa's dystonia different from some other similarly inherited disorders like Huntington's disease, in which nerve cells in the brain die.

While patients with Segawa's dystonia respond to dopamine, the dopamine deficiency may not be the root cause of the disorder, Fink explained. His investigations have revealed that his patients also have a deficiency of bipterin, one of the chemicals critical to the body's ability to make dopamine.

Fink's biochemical detective work is focusing on dopamine synthesis—how the body makes this essential chemical. "There are a limited number of steps to be analyzed in dopamine synthesis and bipterin synthesis, or in the feedback between bipterin and dopamine synthesis," Fink said. "So I am very optimistic that we are going to find first the biochemical abnormality and then the genetic abnormality that causes this."

Fink is looking for more patients like Kimberly. The idea that a large number of disabled people might be walking if only they received Sinemet drives his research. He also needs more patients to complete studies aimed at locating the faulty Segawa's dystonia gene, discovering how widespread the disorder may be and solving the biochemical puzzle. Physicians or patients who wish to reach Fink can write him at the NINDS Developmental and Metabolic Neurology Branch, NIH, Bldg. 10, Rm. 3D03, Bethesda, MD 20892. The letter should include the patient's health records.

"If we say that a small percent of people thought to have cerebral palsy or spastic paraparesis really have Segawa's dystonia," Fink said, "you're still talking about 10,000 to 20,000 people in the United States who are misdiagnosed."

While Segawa's dystonia is both rare and rarely diagnosed, patients with the disorder might provide important clues to many other disorders. "That's what we're hoping," Fink said, "that cures for a whole class of neurological diseases will be discovered, disorders that have trouble with their neurotransmitters." □

## The NIH Record

Published biweekly at Bethesda, Md., by the Editorial Operations Branch, Division of Public Information, for the information of employees of the National Institutes of Health, Department of Health and Human Services, and circulated to nonemployees by subscription only through the Government Printing Office. The content is reprintable without permission. Pictures may be available on request. Use of funds for printing this periodical has been approved by the director of the Office of Management and Budget through September 30, 1990.

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## What Is Segawa's Dystonia?

Segawa's dystonia is a treatable disease of the brain, affecting the brain's regulation of muscle tone. The term dystonia describes the abnormal, rigid body and limb postures resulting from involuntary muscle contractions. In some dystonias the rigidity affects only part of the body such as the hand or neck. Segawa's dystonia, however, affects the whole body, but the symptoms are most severe in the feet, ankles and legs. The formal name for the disorder is "progressive dystonia with diurnal variation."

Dr. John K. Fink, an NINDS neurogeneticist, uses these six features of Segawa's dystonia to distinguish it from other dystonias, cerebral palsy and spastic paraparesis:

- **Family history.** Another affected family member provides an important first clue. Since a parent or sibling can carry the gene but be free of symptoms, however, the lack of another family member with the disorder doesn't rule out a diagnosis of Segawa's

dystonia.

- **Age of onset.** Segawa's dystonia begins in childhood, usually about the first or second grade, gets worse for a period of years and then reaches a plateau.

- **Spasticity.** An examination of the patient reveals spasticity as well as the constant rigidity of dystonia.

- **Diurnal fluctuation.** The symptoms get worse during the day. Typically, a victim can walk in the morning but is disabled by the afternoon. The variation may pass unnoticed with either very mild or very severe symptoms.

- **Lack of another condition.** The doctor has to rule out problems such as a brain tumor, a degenerative disorder or a reaction to medication or drugs.

- **Response to Sinemet.** A rapid and dramatic improvement after a low dose of Sinemet clinches the diagnosis.

## Bartoshuk To Give 1990 NIDR Kreshover Lecture

The chemical and genetic factors that influence taste sensations and the role of dentists as the clinicians most likely to diagnose taste disorders will be the subject of the 1990 NIDR Seymour J. Kreshover Lecture. Dr. Linda M. Bartoshuk of Yale University School of Medicine will deliver the lecture, entitled "The Sense of Taste: New Directions for Dentistry," on Wednesday, May 30, at 3 p.m. in Bldg. 10, Lipsett Amphitheater.

Bartoshuk, a renowned investigator in taste research, has been associated with the medical school at Yale since 1971. She holds joint appointments as a professor in the departments of surgery (otolaryngology section), psychology, and epidemiology and public health. She also is a fellow of the John B. Pierce Foundation Laboratory in New Haven. Bartoshuk's studies have led to the development of new methods for assessing taste and identifying taste disorders. Her research on chemical and genetic factors that influence taste has important implications for the food industry in developing new products.

Although the four basic tastes of sweet, sour, salty and bitter are distinct, there is greater variation in how people experience sweet and bitter than salty and sour. In her research on taste genetics, Bartoshuk has shown that sensitivity to the bitterness of saccharin (used in many diet drinks) and potassium (used as a salt substitute) is determined, at least in part, by genes. Her studies have demonstrated that individuals who perceive these substances as bitter also find the chemical PTC (phenylthiocarbamide, found in the cabbage family) to be bitter. She estimates that two-thirds of Americans are "tasters" of PTC. Reactions to PTC may provide a test for gauging reactions to salt and sugar substitutes currently under development.

Because taste is sensed in the oral cavity, dentists should be among the first clinicians to recognize, diagnose and treat certain taste disorders, says Bartoshuk. Dentists also play an important role because taste dysfunction can result from poor oral hygiene, periodontal diseases or abnormal substances that find their way into saliva.

For many people, taste dysfunction is a disturbing problem that can affect health by adversely influencing food and fluid intake and decreasing the enjoyment of food.

Alterations in taste occur in a variety of ways. Taste qualities can be lost, or taste phantoms may occur in which a person perceives a taste where no stimulus is present. The cause of a taste phantom may be as simple as a foreign substance in the mouth that enters through saliva or as complex as localized seizure-activity in the brain. Clinical assessment of taste function is important both



Dr. Linda Bartoshuk

to understand the source of a dysfunction and to suggest treatment measures.

After graduating from Carleton College in 1960 with a B.A. in astronomy, mathematics and psychology, Bartoshuk completed graduate studies at Brown University where she earned an M.Sc. and a Ph.D. in psychology. She is a fellow of the American Association for the Advancement of Science and the American Psychological Association, a former chair of the Association for Chemoreception Sciences and president-elect of the Eastern Psychological Association. She holds memberships in numerous professional organizations including the Society for the Study of Ingestive Behavior, the New York Academy of Sciences and the Society for Neuroscience.

Author of more than 75 scientific articles, Bartoshuk has served as editor of *Chemical Senses* and consulting editor for *Perception and Psychophysics* and *Sensory Processes*.—Jody Dove □

## Course in Laboratory Safety

For the third consecutive year, a course in laboratory safety for NIH summer employees, research associates and guest workers is being offered by NIDDK and the NIH Division of Safety. The half-day course is designed to meet the needs of all individuals who are beginning research or laboratory work at NIH. Emphasis is on safety awareness, principles of laboratory safety and waste management.

The course will be given on the Bethesda campus at the following times and places:

May 22, 8:15 a.m. — 12 noon, Bldg. 1, Wilson Hall  
 June 5, 1:15 — 5 p.m., Bldg. 10, Lipsett Amphitheater  
 June 19, 1:15 — 5 p.m., Bldg. 10, Lipsett Amphitheater  
 July 9, 8:15 a.m. — 12 noon, Bldg. 10, Lipsett Amphitheater

Preregistration is not required. For further information call 496-2346 or 496-1200. □

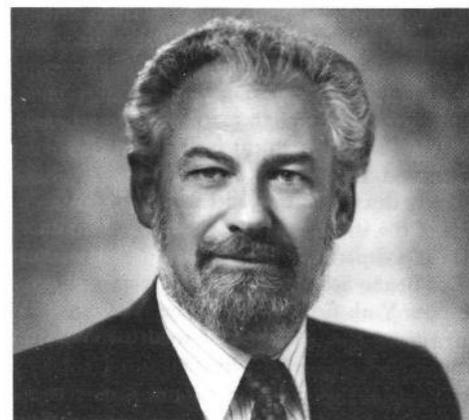
## Consensus Development Conference On Intravenous Immunoglobulin

The National Institute of Allergy and Infectious Diseases and the NIH Office of Medical Applications of Research will sponsor an NIH Consensus Development Conference on "Intravenous Immunoglobulin: Prevention and Treatment of Disease." The conference will be held May 21-23, in Masur Auditorium, Bldg. 10.

The use of intravenous immunoglobulin (IVIG) has increased significantly in recent years. IVIG has been used in bone marrow transplantation and such diverse diseases as primary immunodeficiencies, pediatric AIDS, infections in low birth weight infants, B lymphocyte malignancies, idiopathic thrombocytopenic purpura, Kawasaki's syndrome and demyelinating polyneuropathies. However, important questions regarding its use still remain.

The conference will include a day-and-a-half of presentations and discussions on IVIG. A consensus panel will then meet to weigh the scientific evidence presented and write a draft statement. On the final day of the meeting, the panel will present its final consensus statement to the conference audience and invite comments and questions.

Biomedical scientists, health care providers, patients and their families and the public are encouraged to attend. Information on the program may be obtained by calling Mary Jane Walker, 496-5717, or Bill Hall, 496-1143. □



Dr. Stephen M. Weiss has been elected president of the International Society of Behavioral Medicine. He will be serving a 2-year term and will take office at the the First International Congress of Behavioral Medicine, June 27-30, in Uppsala, Sweden. Weiss is chief of NHLBI's Behavioral Medicine Branch. He was president of the U.S. Society of Behavioral Medicine from 1984 to 1985.

**DIRECTOR***(Continued from Page 1)*

ant secretary for health Dr. James Mason, who chairs the advisory committee to NIH.

- The NIH director should gain two new administrative tools next year—a \$20 million discretionary fund for new initiatives and a cross-institute authority to transfer up to 1 percent of an institute's budget for biomedical research emergencies. Provisions for these tools were included in President Bush's 1991 budget proposal.

- The position description for the NIH director should be reworded to state explicitly that he or she is the DHHS secretary's principal advisor on matters of science policy and biomedical research planning.

Panel members also felt strongly that the DHHS secretary should be encouraged to bring the NIH director to meetings of the Federal Coordinating Council for Science, Engineering and Technology (FCCSET).

FCCSET meeting attendees are, with few exceptions, department and cabinet level officials. Attendance at these meetings would firmly establish the NIH director as premier science counsel to the secretary and would put the NIH director on par with the head of the National Science Foundation, an independent government agency that reports directly to the president.

One committee member suggested as a long-term measure making NIH an entity separate from DHHS.

Such a measure would accomplish three significant goals: It would entitle the NIH director to attend FCCSET and other high ranking, department-level meetings. It would allow the director to be a major player in formulating national science policy. And, it would eliminate the need for short-term steps aimed simply at promoting the status of the NIH director as senior science policy advisor; the status of a department head would be understood.

Lively discussion by panel members on both sides of the issue ensued at the suggestion of NIH as a department.

Dr. Benno Schmidt, managing partner of the New York firm J.H. Whitney & Company, commented: "I suggest we skip the recommendation of NIH leaving the Public Health Service and that we just give the NIH director the status he needs (to attend FCCSET meetings as well as those of other science policy coordination bodies)."

Others on the panel agreed with Schmidt, who felt that the NIH director should attend top level meetings in addition to but not in lieu of the secretary.

"If the meeting is political clout-oriented, then you better have the secretary there," Schmidt emphasized. "If there's a budget

meeting and you want to get another billion for science research out of the president, then you better have the secretary there.

"The NIH director should be recognized as the government's leading authority on biomedical research. (However), I'm not sure the NIH director is the best salesman (of budgetary requests). The Congress, for instance, is moved by a lot of things other than pure fundamental (science) discussion."

The next item on the panel's agenda was an evaluation of the merits of the advisory committee to the NIH director.

Raub, who was called upon to give a summary of the status of that committee, mentioned that the preferred use of the director's advisory group in recent years has been for it to deal with one issue at a time and that recent issues have included, for example, the establishment of a new physical rehabilitation institute.

The advisory committee to the NIH director is a 16-member panel to which each member is appointed by the DHHS secretary to serve a 4-year overlapping term. Eleven of the members are knowledgeable in scientific, medical and research fields; five are from the general public. The NIH director presides as chair of the committee.

Singer, who had researched the history of the committee, summarized the functions of two distinct committee types:

- An advisory committee would primarily serve the director and advise him or her on assigned issues or policies. Members would be appointed by the NIH director and appointments would be independent of secretarial approval.

- An oversight board would have evaluative as well as advisory functions. Members would be appointed by the secretary from a slate of suggested names compiled by the NIH director.

Dr. Paul Gray, president of MIT, asked pertinent questions: "How valuable is the committee now, as a vehicle for the director? How much influence has the director had in naming individuals to the committee?"

According to Raub, the advisory committee has provided regular and substantial consultation as with other councils and boards. "The committee can be as valuable as we make it," he said. "It can and should continue to be a public forum that gives and receives advice equally."

Most panel participants agreed that the NIH director should have free rein in appointing his or her advisory board.

Dr. James Dickson III, a fellow at Boston University's Health Policy Institute, asserted: "The usefulness of a committee like this is completely reliant on the imagination (of its chair)."

Added Dr. P. Roy Vagelos, chair and CEO of Merck & Co., Inc., "The director must see

the committee as a tool as opposed to something that might threaten the director's sense of security and independence."

Support from current NIH'ers for a director-appointed advisory panel was voiced as well.

"If you add another board with quote authority independent of the director," suggested Fauci, "it would be a major disincentive to the director's job."

Fredrickson, who directed NIH from 1975 to 1981 and now works in an NHLBI lab, reiterated, "I can't tell you how important it is for the director to put together a group of people who will assist him in decision-making."

Dr. David Satcher, Meharry Medical College president, hesitated to give the NIH director appointment power independent of the secretary.

"I am not sure that it makes the committee stronger to have the secretary not approve of (its members)."

Mason concurred, adding that the secretary would necessarily be sensitive to include representative appointments of women, minorities and persons from broad geographic areas.

The advisory committee on NIH, for instance, includes highly qualified women, minorities and representatives from both coasts as well as southern and central United States regions.

"That's one thing that the director is going to be accountable for," Mason said. "There's no question that the qualifications have to be there, but in a national organization like NIH such considerations are very important."

The panel agreed to suggest that the NIH director's advisory committee should not be an oversight board and that its members should be recommended by the director and approved by the secretary.

After asking for additional comments from the panel, Mason closed the meeting. "You've given an incredible amount of your time. I thank you on behalf of myself and the secretary for your extraordinary willingness to serve."

A short list of names for the NIH director position has already been compiled and submitted to the secretary by the search committee. Sullivan has postponed action on the list until early June when final deliberations and suggestions of the advisory committee have been completed, distributed and agreed upon. □

**Carpooler Wanted**

A three-person car pool is looking for a fourth member. Pool leaves from the Annandale/Springfield, Va., area. Members work regular hours. For information call Jack Nance, 496-2411. □

## OMS Offers Mammography Screening, June 18-22

"Early detection, your best protection" is the theme of the National Breast Cancer Awareness program, sponsored by the National Cancer Institute along with 10 other cooperating breast cancer programs. In keeping with this theme, mammography screening, the best way to detect breast cancer as early as possible—up to 2 years before a breast lump can be felt, will be sponsored by the Occupational Medical Service of the Division of Safety between June 18 and 22.

This low-cost screening, provided by the Washington area radiology group of Drs. Groover, Christie and Merritt, follows NCI's suggested three-point breast cancer detection plan for all women 40 and over that includes breast self exam; a clinical breast exam, and a mammogram.

There are good reasons to participate in this program:

- All women are at risk for breast cancer, not just women with a family history of breast cancer;

- Beginning at age 40, women are encouraged to have a mammogram every 1 to 2 years. After 50, mammography would be done annually. (OMS mammography screening is made available to NIH employees at least annually);

- A woman's chances of getting breast cancer rise greatly as she gets older;

- A mammogram is simple and not painful;

- All results are confidential.

The equipment used on the Groover, Christie and Merritt mammography screening van meets quality and exposure standards developed by the American College of Radiology. The van is staffed by female radiology technicians. All mammograms are read by board-certified radiologists and results are

given to screening participants.

To participate in this program, women must:

- Be age 40 or older unless there is a family history of breast cancer. Younger women who have a physician's order (prescription) will be accommodated;

- Be asymptomatic—experiencing no current breast problems (example: pain in one breast, lump or nipple discharge);

- Have a physician to whom to report written results (the participant will also receive a copy);

- Not have had a mammogram within the last 12 months;

- Not have breast implants;

- Not be pregnant or nursing.

The cost of the mammography screening program is \$70 to be paid at the time of the exam. Payment may be made via Visa, Mastercard, check or money order. Cash is not accepted.

To schedule your 30-minute appointment, call the OMS Westwood health unit at 496-7638 every day except Thursday. Space is limited and requests will be handled on a first-come, first-served basis. Women unable to participate in this program may request a list of alternative screening centers.

June 18-22 are the screening dates at the following locations:

Monday, June 18	31C parking lot
Tuesday, June 19	31C parking lot
Wednesday, June 20	10C shuttle turn
Thursday, June 21	Westwood rear parking lot
Friday, June 22	Executive Plaza parking lot

Take a step toward better health by participating in this breast screening and education program. □

## DHHS Honors NIH Staffers

Six NIH staff members received DHHS awards at an Honor Awards Ceremony held in the Hubert H. Humphrey Bldg.'s Great Hall on May 4. Dr. William F. Raub, NIH's acting director, assisted HHS secretary Dr. Louis Sullivan with the presentation of the awards.

The *Distinguished Service Award* is the highest honor award bestowed by the department. It was conferred by the secretary for exemplary performance in the administrative field to two NIH staff members, John D. Mahoney, NIH associate director for administration, and Dr. Suzanne S. Hurd, director, Division of Lung Diseases, NHLBI.

The *Secretary's Ten Outstanding Employees of the Year Awards* are the secretary's personal awards that are given in recognition of employees in clerical, administrative, technical, professional and general support positions whose work is basic to meeting the department's goals. Claire R. Rodgaard, secretary to the deputy director of the Clinical Center, was selected for this award based on her overall performance, which was appraised at the highest level under the department's performance system.

The *Secretary's Distinguished Volunteer Service Award* is designed to encourage and give recognition to individuals or groups of employees who engage in and perform outstanding volunteer services within their communities. Dr. Frederick T. Hambrecht, health scientist administrator, Division of Fundamental Neurosciences, NINDS, received this year's award.

Also honored at the ceremony were Christopher Eve, clinical pathology department, CC, for 50 years of service and Roskey Jennings, Laboratory of Viral Diseases, NIAID, for 60 years of service. Honorable mention was given to Dr. Naomi L. Gerber, chief, department of rehabilitation medicine, CC, in the HHS award brochure as winner of the GEICO Award, a nongovernment award. □

## Hinshaw Awarded Honorary Degree

Dr. Ada Sue Hinshaw, director of NIH's National Center for Nursing Research, will receive an honorary doctor of science degree from Marquette University in Milwaukee at the school's 109th annual commencement on May 20.

Hinshaw will be honored for emphasizing the work of nurse researchers and helping to shape the direction of the nation's health care policies through her NCNR position, which she has held since 1987. Her own research efforts include the development of evaluation models for innovative care programs as well as work to combat the current nationwide shortage of nurses. □



Members of the Odd Fellows recently donated more than \$9,000 of their yearly profits to the Children's Inn at NIH. On hand for the presentation were (from l) Gene Ingraham, grand master of the Grand Lodge of the District of Columbia; Randy Schools, R&W general manager; Kathy Russell, inn president; Eleanor Sennott, president of the Department Association of Maryland and the District; Betty Burns, past president of Rebekah Assembly of D.C.; and Clifton Tolson, past grand patriarch of Odd Fellows.

## R&W

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Today, life at NIH is enriched at almost every turn by R&W. In the past year, the association has helped raise some \$225,000 to help endow the Children's Inn at NIH, has helped kick off both the CFC and Savings Bond drives, raised more than \$10,000 for the Patient Emergency Fund (which was established by R&W in June 1953 as the Patient Welfare Fund), helped to form the Wegener's Granulomatosis Foundation, supported Camp Fantastic and its parent organization, Special Love, Inc., encouraged health promotions including a Fitness Center that, in terms of membership, is at capacity, and helped launch the NIH Alumni Association.

And that is only a partial resume of accomplishments. A simpler way to appreciate the range of R&W services is to consider the following scenario—"Weekend a la R&W."

You get to the R&W Gift Shop in Bldg. 31 at opening time, 9 a.m., on Friday, to pick up the dark suit that you left there earlier in the week for dry cleaning. You are going to need it Sunday when you attend a performance of the Washington Ballet, tickets for which R&W sold at a discount. While waiting at the counter you notice that Mother's Day candy is on sale and buy a sample. Wandering over to the video rental display, you pick a film or two. On the way out the door, you pass up an opportunity to purchase a "Simpsons" t-shirt offered by an R&W vendor in the hallway. That afternoon, however, you visit the Maine Lobster Man for some fresh shrimp; he is sponsored by R&W. 52 weeks of the year, paying the association \$60 each week, which is used to cover administrative fees for R&W. Saturday you take a bike trip sponsored by R&W, then wind down that evening with the videos. Following the ballet Sunday, where you saw all those lithe bodies leaping about, you resolved to join the next Quik-Fit aerobics session offered by R&W's Fitness Center. You also pledged to get your cholesterol level checked, courtesy of R&W and the Occupational Medical Services.

"We have a pretty well-rounded program," allows Randy Schools, general manager of R&W for the past 12 years and, by all accounts, the most ambitious and talented GM the association has ever had. "We're here to help people realize their potentials and gear them up for healthy lifestyles."

Three years ago, the National Employee Services and Recreation Association (NESRA, of which Schools is currently president) named NIH's R&W the best employee services and recreation program in the United States. More than 4,000 companies from private industry, military and government agencies competed

for NESRA's "Eastman Award," which NIH won. R&W is also the nation's only employee services group to get a White House Private Sector Award, bestowed in June 1986 for the association's charitable activities.

Today there are no fewer than 17 honors and awards festooning the walls of Schools' subterranean office in Bldg. 31. Typical of Schools, he is not particularly interested in discussing them. Rather, he directs credit to his board of directors ("We've been really fortunate that the board has given strong leadership to our programs."), his staff ("The R&W store managers and sales staff are the backbone of our operation—they're the best."), NIH administrators, and the volunteers who serve as institute representatives and club chiefs.

"Our volunteer base helps both the patient communities and also fellow employees," he says. One of his staffers, Ruth Sragner, quietly makes sure that the Clinical Center's patient activities department has the resources it needs to serve the hospital's pediatric population. Another volunteer, Bill Stancliff, organizes cookie drives and other services for the children.

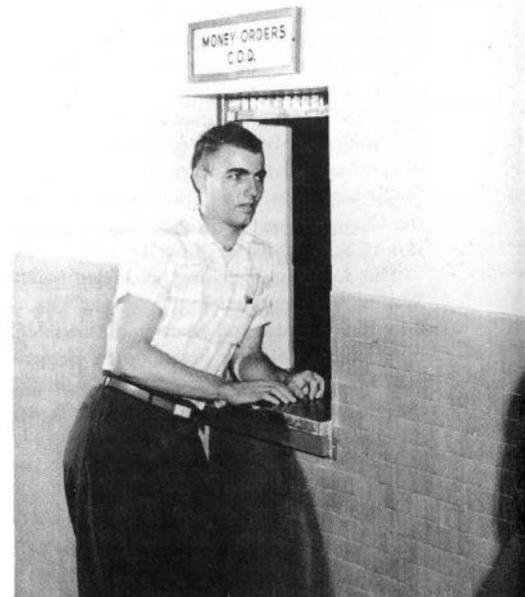
Schools also credits Dotty Pulver, assistant



*Hazel Rea, deputy director of NIMH's intramural research program, was president of R&W several decades ago. An attraction to theater productions drew her to R&W soon after her arrival here in 1949.*

general manager of R&W, for her dedication to R&W and ability to sacrifice herself for R&W causes, and Kathy Russell and Dr. Phil Pizzo of NCI, for getting him involved with Camp Fantastic, which led to the Children's Inn. "It's been great seeing these ideas lead into reality," he said.

Lest Schools be regarded as a Pollyanna, he is also quick to acknowledge R&W's deficiencies—a "hand-to-mouth" financial operation, which is a little uneasy even for a nonprofit corporation, few indoor sports and no swimming facilities, inability to create new stores at will (even though employees at Executive



*The first post office at NIH was introduced by the R&W. It was mainly patients but also was open to employees.*

Plaza are clamoring for an R&W branch) and a lack of some services that employees have asked for, specifically a fax machine and a Federal Express outlet for employees' personal needs.

"If I could build my dream here, it would include a total fitness center, and day care and elder care facilities—all under one roof," he said. "That's the prototype of what's happening in private industry now."

Although hardly new, employee services



### R & W NOTES

Don't throw away the coupons in your cigarette packs. Send them to Mrs. Rebecca Voitk, Room 2102 in T-6, who is collecting for the Recreation and Welfare Association. The coupons are used to obtain door prizes for Association activities.

Response has been very favorable to the recent questionnaire about dance instruction at NIH. Erv Liljegren has received over one hundred favorable replies, with interest centering primarily on classes in Latin American and conventional ballroom dancing. The Recreation and Welfare Association is contemplating sponsoring dance classes at NIH by a qualified instructor.

Dec. 8, 1992



Located in the basement of Bldg. 10, it served

outfits such as R&W are quickly gaining acceptance in corporate America as managers balance the cost of recreation facilities against the cost of health care when employees fall ill.

"Employee health at the worksite is economically important," said Schools, noting that the first employee service organization began in the late 19th century when National Cash Register Co. in Dayton, Ohio, sponsored a company picnic and sports league. "Companies realize that their health care bills will

be smaller if their employees don't smoke and do exercise."

During the 1960s, Schools recounted, fitness and day care gained ascendance as important employee services.

"The most recent trend has been toward service to the community," he said. "President Bush has advocated that employee associations make more of an effort to serve their own communities, to become one of those 'thousand points of light.'"

While the recreation side of R&W has always been popular at NIH, the welfare side has also enjoyed a natural audience—the patients who come here for treatment. All patients and their families are automatically given guest membership in R&W.

"These days, we're more attuned to special events than we were in the past," says Schools. "Collecting operating funds for the Children's Inn, the Friends of the Clinical Center and Camp Fantastic is our big goal now, but we will continue to offer a wider array of services to employees."

Among the most popular services, par-



Dr. Helen Gift, a research sociologist with NIDR and president of R&W, says the best thing about R&W is that it encourages interactions among all employees.

ticularly for foreign workers, are the 30 or so day trips planned each year by Kelly Goka, director of recreation and member services for R&W. These include excursions to Atlantic City and New York City, beach outings to Ocean City, bike and canoe trips, tubing voyages and horseback rides. Other common trips include walking tours of Washington area attractions such as the White House, National Cathedral and Arlington Cemetery, shopping trips to outlet stores in Reading, Pa., and bus trips to Orioles' games.

"Day trips are particularly good for our international employees," noted Schools, "because they get to do things they wouldn't ordinarily plan to do alone."

R&W also arranges discount trips to such national attractions as Disney World, Sea

Dr. Gordon Seger, President of the Association, announces the appointment of a committee representing the Association to explore the possibility of financing the building and maintenance of a swimming pool at NIH. This committee is composed of William Payne, NCI, Chairman, Mrs. Lillian Rankin, DRG, and Harold Curran, OD.

May 11, 1953

World, Busch Gardens and Kings Dominion.

Forty years ago, when R&W was in its infancy, it still planned ambitious itineraries for its members. The membership fee then was 50 cents a year and enabled employees to sign up for an annual sea cruise to Bermuda. Stay-at-homes could enjoy a popular R&W Bridge Club or plant vegetables in gardens on campus, under the auspices of the R&W Garden Club.

Hazel Rea, deputy director of NIMH's intramural research program and a former R&W president, remembers those days fondly. Born 79 years ago in Van Buren, Ark., she came to Washington in 1935 and NIH in 1949.

"Very soon after arriving at NIH I got involved with R&W," she recalls. "I was involved with the Hamsters first. We used to have so much fun with that. Of course the place was much smaller then. NIMH had only 60 people then and now we have 600 in intramural research."

A dancer from her youth, Rea joined the Hamsters when the group needed a choreographer for productions such as *Oklahoma!*, in which present DCRT director Dr. Arnold "Scotty" Pratt played a lead role, along with distinguished cancer researcher Dr. Bruce

(Continued from Page 8)

There will be fun and entertainment to suit everyone at the Recreation and Welfare Association's first party this fall. It's to be a Harvest Dance in Wilson Hall on Friday, September 26, beginning at 9:00 p.m.

Erv Liljegren, committee chairman for this party, hopes that you'll come wearing comfortable, casual clothes. Leave your coats and ties at home, boys! He has arranged for a juke box to supply the music for most of the dancing. But later on, the joint will jump to the boogie beat of "Lefty" Jenkins, Payroll Section's red-hot piano player. A prize will be given to the best jitterbug couple on the floor.

You lovers of country hoedowns will feel right at home too, for the committee has arranged for some square dancing during the evening.

Sept. 22, 1952

For only \$1 you can join the R & W and have a whole year packed full with educational, recreational, and welfare activities. As an added attraction during the February 1-15 membership drive, you will get a free bonus of a 25-cent Agent's card, which entitles one adult member of the employee's immediate family to all membership privileges.

For this small amount of money you will get the benefit of the discount list and special rates on activities such as the following: golf, bridge, dancing classes, piano instruction, gardening, charm courses, softball, basketball, volleyball, camera club, dramatics, NIH chorus, rifle and pistol clubs, fencing, archery, and tennis clubs, sports equipment loan service. See your Division Representative today or take advantage of this February offer when your Keyman sees you.

Jan. 30, 1956

**(Continued from Page 7)**

Ames, now at the University of California. Rea's daughter Ruth also danced in the shows.

"Not that many (people) were involved in R&W back then," Rea remembers. "We were always after new members."

R&W started the first post office on campus, said Rea, mainly for patients' use.

"Our name was R&W, but we did very little in welfare, I noticed. We used to make loans to employees in financial straits. We also began to pay a small death benefit—a little cash at the moment of need to emphasize the welfare aspect of our name."

Bridge tournaments, softball (NIH teams were perennial Metro area champions) and chess were the most popular "R" activities.

"If there were enough people interested, we'd back it," Rea said. R&W also rented sports equipment and ran a small dark room for photographers.

"Getting space at that time was just as difficult as it is now," she stated. "NIH was always supportive of R&W, however, and tried to accommodate our needs."

Before it opened a gift shop in Bldg. 10, again primarily for patient use, R&W relied on "blind stand" sales and membership fees for funds. "We had no overhead, and a lot of cash," Rea said.

She used to counsel young people starting administrative careers at NIH, particularly the shy ones, to get involved in R&W clubs, for the contacts it would provide.

Says Schools today, "Club membership offers the opportunity to develop leadership skills. It can pay you back on the job."

Rea served as president of the League of Federal Recreation Associations in 1961, 1962 and 1964; Schools was president in 1980-81.

"But I gave up R&W eventually," Rea related. "I had served my time on it."

Agnes Richardson, who was president of R&W from 1983 to 1987, just can't give it up.

"I see myself staying in R&W until I leave NIH," said Richardson, who came here in September 1973 and is now corresponding secretary for R&W. Under her leadership, the NIEHS branch of R&W opened, R&W joined the effort to raise funds for the Children's Inn, the Fitness Center was started and dry cleaning became an R&W service.

"In 1974 I became an alternate representative to R&W from NEI. I became a rep the next year and have been in ever since."

There is one R&W representative for every 500 employees in an institute, she said. NCI, for instance, has four.

"I believe our association is the largest in the metropolitan area," she said. "And the most active."

Richardson said much credit for R&W's vitality goes to the staff who work there.

"They are true employees—they give their all to R&W."

She also emphasizes the importance of strong support from the top—NIH directors James B. Wyngaarden and Donald Fredrickson both thought highly of R&W, she said.

"It's really a fantastic organization," Richardson enthused. "It does a lot."

One of the things it did in 1967-1968 was publish a newspaper called *R&W Pulse* that was distributed for free to members every month. Former editor Marc Stern, now chief of the News Branch in OD's Office of Communications, said the paper folded when authorities felt it competed unnecessarily with the *NIH Record*. Yellowed copies of *Pulse* can be found in some personal archives; a copy signed by former President Lyndon B. Johnson during an NIH visit is on file in the Clinical Center.

Today's R&W is overseen by president Helen Gift, a research sociologist at NIDR and chief of the institute's health promotions section. A native of Kingsport, Tenn., she came to NIH 4 years ago from Chicago, where she held posts in health planning, survey research and market research.

"I thought R&W was just a store at first," she said. New in town, she accepted her executive officer's invitation to become an R&W rep because, "it's kind of nice to have friends outside of your immediate work environment. It seemed like a good way to meet people and get involved. I'm not a recreation person per se. I always get kicked off team sports. But I recognize the need for a balanced environment for employees. I guess that's the sociologist in me."

Following her term as a rep, Gift decided,

## Steps Taken to Protect R&W Postal Service

Measures have been taken to prevent a recurrence of the armed robbery of the R & W Postal Service in the Clinical Center, which took place about 2:50 p.m. on Dec. 22.

The FBI is investigating the incident in which some \$3,500 was stolen. The robber, who escaped, tried to prevent identification by pulling a turtle-neck sweater over his face so that only his eyes could be seen.

When pursued by a female employee, he fired a warning shot into the ceiling of the stairwell leading from the B-2 level.

Jan. 18, 1972

"if I'm going to be involved, I might as well be well involved," and ran for corresponding secretary, a position she held for 2 years. Elected president of R&W for a 2-year term last spring, Gift heads the association's board of directors.

"The board's prime responsibility is to set a budget, decide on staff salaries, and consult with the general manager," she said. The board meets the second Tuesday of each month at the FAES House.

Like Schools, Gift makes health promotion a major goal for R&W, which links nicely with her job at NIDR and appointment to NIH's prevention coordinating committee.

A recreation facility that includes a swimming pool and full court gymnasium is one of her ambitions; it would be open to patients and staff. Gift notes ruefully that the local



*The glory days of the Hamsters, NIH's R&W-sponsored theatre group, included major productions such as Oklahoma!, in which talented staff not only acted out the parts, but also painted the scenes and played the score. "NIH has always had very talented employees," said Hazel Rea, an ex-R&W president.*

**RECREATION & WELFARE ASSOCIATION**

A glee club is being organized under the leadership of Dr. Willis C. Beasley. He was director of the NIH Glee Club in 1940-41. More than 75 voices are expected to make up the glee club chorus.

"If sufficiently good voices can be found," says Mr. A. P. Collins, president of the NIH Recreation and Welfare Association, "a number of quartets will also be organized. These might be used later to provide entertainment for NIH meetings and other functions."

Formation of a girl's soft ball team is also now being planned.

May 20, 1949

YMCA has recently forbidden NIH AIDS patients from using its pool facilities. And that renovations to the 14th floor gym in the Clinical Center have curtailed some indoor sports activities.

"NIH should be the premier agency for health promotion and facilities," she stated.

Gift's second major goal is to "continue to provide civic and charitable services and opportunities for volunteers." The Children's Inn, scheduled to open in June, will continue to require much volunteer effort, she said.

"R&W is there to make people healthier and happier in their workplace," Gift said.

To the extent that it is possible, she tries to accommodate employee suggestions. "All kinds of interesting ideas come up," she said. Examples include selling foreign newspapers at gift shops, vending Metro subway passes, offering disability insurance, and expanding self-help courses related to smoking cessation and weight-watching.

"We're pretty responsive on things when we know the employees want them," Gift said.

Looking back at what it has offered employees for the past 45 years, it's safe to conclude that R&W will likely remain the flagship of federal employee service associations.

Mark Ellsworth, concertmaster of the National Gallery Orchestra, will direct the newly formed NIH symphony orchestra. Rehearsals will start in September, and, to date, 65 employee-musicians have expressed interest in the organization. Rosalie Silverberg, extension 4396, has more information.

July 20, 1959

**Randy Schools Leads R&W To New Heights**

One of the reasons R&W enjoys such a high profile at NIH and is involved in so many aspects of campus life is its general manager, Randy Schools.

Like Superman, he seems capable of being in two places at once. Where Superman's one weakness was kryptonite, Schools' flaw is a seeming inability to say no. One of the many college interns who have filtered through Schools' tutelage once left a framed message on his desk: "What part of No don't you understand?"

The door to his office is a ragged welter of yellow post-it messages from callers all over campus and beyond. His desk is always stacked with ranges of correspondence and reports. His most habitual mode of conversation is to talk to two people at once. And to think that he came to R&W 12 years ago because it was a less stressful job . . .

Schools received a degree in business management in 1967 from the University of Baltimore. Preferring to enlist in the Army rather than be drafted during the Vietnam War, he was assigned, on the basis of test scores, to counterintelligence work.

Posted to Ft. McNair in Washington, he joined the 116th Military Intelligence and was assigned to do background investigations on personnel at the White House during 1968-69.

"I met Nixon and Ben Gurion and DeGaulle," he recalls. Reminded that the Nixon White House was characterized by enemies lists and the Watergate scandal, Schools chuckles, "I have my theories on Deep Throat."

Once his tour in the Army was up, Schools returned to a field that interested him from college days—retail sales. He joined the old Lansburgh's department store in Washington and remained until it went out of business. Then he joined Garfinckel's as an operations manager and completed work on a master's degree from Georgetown University in liberal studies.

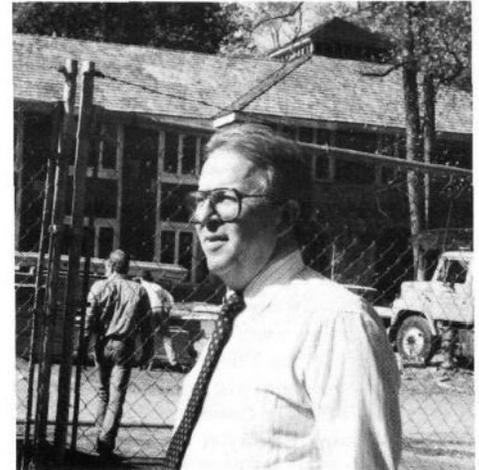
"I was responsible for the day-to-day operations of the stores and for managing merchandise," he said. He handled renovations of Garfinckel's stores at Montgomery Mall, Seven Corners and Spring Valley.

Then Schools was stricken with myocarditis, a viral infection of the heart that prompted him to reconsider his career.

"I was in Suburban Hospital for 3 weeks, two of them in intensive care," he remembers. "I was shook up. Definitely shook up."

While convalescing, he noticed an ad in the paper for the NIH R&W general manager-ship. He applied and won the job, succeeding Jim Davis.

Tributes to the success he has enjoyed in



Schools pauses outside the Children's Inn at NIH, a project that R&W has supported from the start.

the past dozen years come from all corners. Says current R&W president Dr. Helen Gift: "I don't even have a job, he's so good. The R&W staff are so good we (the R&W board) almost don't need to exist. We have to hold them back, they're such a marvelous staff."

Opines Hazel Rea, president of R&W in the late 1950s: "Randy's probably the best one we've ever had."

"Randy has been the biggest asset for R&W," said Agnes Richardson, R&W president from 1983 to 1987. "He's a man of all trades. He just never stops. He's been the greatest thing that ever happened to us. If we lose him, R&W would go right back down."

The Institute of Contemporary Arts is offering group membership rates to R & W members this year.

Located at the Corcoran Gallery, 17th St. and New York Ave., N.W., the Institute sponsors approximately 40 programs annually. They include concerts, films, exhibitions, poetry readings, and lectures on the arts and humanities.

Guest lecturers this season will include T. S. Eliot, Tennessee Williams, Robert Graves, and Aldous Huxley.

July 29, 1957

## Brown, Radiation Safety Officer, Dies

Captain J. Manson Brown, NIH radiation safety officer from 1963 to 1972, died Jan. 8 at age 63.

He was a charter member of the Health Physics Society and a certified health physicist. He served as treasurer of the Baltimore-Washington chapter of the Health Physics Society in 1963 and as its president in 1969. From 1972 to 1986, he was a member of the NRC Licensing Staff.

Brown served in the Navy during World War II. He later was graduated from the Citadel University in South Carolina and did graduate work at the University of Tennessee. He spent some time at the Los Alamos facility of the Atomic Energy Commission and at the Weapons Testing Facility at Eniwetok Atoll.



Brown was instrumental in developing the first NIH radiation safety guides, numerous radiation safety training programs and radioactive waste disposal facilities at NIH, all of which now serve some 2,500 laboratories and 5,000 users of radioactive materials at NIH.

Partly as a result of Brown's leadership, NIH became a worldwide model for safety in biomedical research with radioactive materials. Brown was a pioneer during a period in which radiation safety in biomedical research was a new and previously unexplored discipline. His lasting contributions as a health physicist remain in the current radiation protection program in the NIH Division of Safety. A film in the National Library of Medicine archives depicts Brown's work with the U.S. Coast Guard during NIH's program for the disposal of radioactive waste at sea in the 1960s.

Brown will be remembered most by his family, friends, associates and coworkers for his exceptional way with people. His southern gentility brought out the best in those with whom he came in contact. We have many fond memories of J. Brown, and he will be sorely missed as a good friend and professional associate by his many colleagues.—John Howley



*Dr. Michael M. Frank, NIAID's clinical director, delivered the 1990 Jerome Glaser Memorial Lectureship at the recent annual meeting of the American Academy of Allergy and Immunology held in Baltimore. In his lecture on "Complement and Disease," Frank, a renowned expert on the complement system, reviewed complement's important role in protecting the body against infection and its contribution to disease. Frank, who also serves as chief of NIAID's Laboratory of Clinical Investigation, and his colleagues are investigating more effective ways to treat patients with diseases of the complement system. The lectureship, named in honor of a noted clinical investigator in pediatric allergy, is presented annually by an outstanding expert in the field of allergy or immunology.*

## PAL Consulting Hours Extended

The DCRT Computer Center's consulting desk is now open from 8:30 a.m. until 4 p.m. every business day. Previously the consulting desk closed at 1 p.m. The consulting desk, managed by the PAL unit, is an integral part of the user assistance effort of the Computer Center Branch. The consulting desk telephone number, 496-5525, has been known for nearly two decades as a valuable information resource, where senior computer specialists provide answers over the phone to users' questions about Computer Center services.

More than 14,000 calls were received by the consulting desk in 1989. The consulting desk handles questions on a wide variety of software, hardware and services supported by the Computer Center. The types of questions received include "Can I insert records into a DB2 table via an ISPF dialog?" (Yes), "What Kermit command can I use to download a file to my PC?" (SEND), and "Can I connect my office's 3 Com LAN to the mainframe?" (Yes).

The new consulting desk service hours represent another step in Computer Center efforts to meet user's needs and to make computing an effective, efficient and economical experience. For more information, contact the PAL Unit, 496-5525. □

## Telecommunications Course Offered

Networking and communications have become important issues in offices and laboratories throughout NIH. The DCRT Computer Training Program now offers a new self-study course called Protocol 90 that clarifies the sometimes-bewildering world of connectivity.

Protocol 90 provides a detailed overview of telecommunications services, addressing the following areas in particular: data communication, voice communication, integrated voice and data networks and telecommunications services. The course is designed for students who have no specialized experience with telecommunications or computer hardware and software.

There are four modules in the Protocol 90 course, each dealing with a related set of topics. The first module covers electronic signals, voice telecommunications, modulation techniques, broadcast radio and television, and system components and structures. The second module covers data transmission and transmission protocols, communications media, and interfaces. The third module covers implementation of networks, data communication devices, open systems interconnection (OSI) and OSI protocols. The fourth module includes information on local and wide area networking architectures (LANs and WANs).

Protocol 90 consists of 18 diskettes that run PC-compatible computers and workbook. There is a one-time \$20 charge for the workbook; the diskettes are available at no charge on a 1-month loan.

As an alternative to using diskettes for the computer-based portion of the course, Protocol 90 can be installed on PC hard disk or on a LAN (perfect for groups of students). The self-study format of the course allows students to proceed at their own pace, and makes scheduling time for the course completely flexible. The entire course takes 50 hours to complete, and provides a balanced section of terminology, concepts, and issues relating to the technology and management of telecommunications.

For more information on Protocol 90, contact the NIH Computer Center's Training Unit, 496-2339. □

## Normal Volunteers Needed

The Developmental Endocrinology Branch, NICHD, is recruiting healthy women as well as infertile women for clinical research studies. Candidates must be 18-35 years old and have regular menstrual cycles. They should not be currently taking chronic medication, including birth control pills.

Studies last for one menstrual cycle and require frequent blood drawing and an endometrial biopsy. Compensation is available. For further information, call 496-4244. □



## TRAINING TIPS

The NIH Training Center of the Division of Personnel Management offers the following:

<i>Courses and Programs</i>	<i>Dates</i>
<i>Management and Supervisory 496-6371</i>	
Practical Management Approaches	6/13
Managing Behavior in the Work Environment	6/19
Practical Management Approaches	7/10
Interpersonal Relationships in the Work Environment	7/10
Working With Personal Differences: MBTI Applications for Personal Development	7/17
Attitudes: How They Affect Productivity in the Work Environment	7/19
Applied Creativity	7/24
Communications for Results	7/24
Reviewing Other Peoples' Writing	7/25
<i>Office Operations Training 496-6211</i>	
Delegated Acquisition	6/25
Basic Time and Attendance	6/7
Domestic Travel	6/18
Foreign Travel	6/12

### *Training and Development Services 496-6211*

Personal Computer training is available through User Resources Center (URC) self study courses. There is no cost to NIH employees for these hands-on sessions.

The URC hours are:

Mon.-Thurs.	8:30 a.m. — 7 p.m.
Friday	8:30 a.m. — 4:30 p.m.
Saturday	9 a.m. — 1 p.m.

Training Center, DCRT, and other training information is available on WYLBUR. Logon to WYLBUR and type ENTER TRAINING



*Delmas Wood (r) was auctioneer at the PEF Auction on May 1, coaxing bids out of a rather shy audience. He proved a master at extracting fair prices for goods and services during the live portion of the auction held in the Visitor Information Center. A record \$11,500 was raised for PEF at this year's event.*

### Open Season for Thrift Savings Plan

The Thrift Savings Plan is having another Open Season from May 15 through July 31. FERS employees who were hired before Jan. 1, 1990, as well as CSRS employees, have an opportunity to change their current election, or make an initial election.

The features of the plan, directions on how to make a plan election and how to change your current withholding are described in the Thrift Savings Plan Open Season Update pamphlet, which will be distributed to eligible employees by their ICD personnel office. Employees who wish more detailed information than the pamphlet provides may request a copy of the "Summary of the Thrift Savings Plan for Federal Employees" booklet from their ICD personnel office. □

### Volunteers Needed for Inn Opening

Grand opening celebrations will take place June 17-23 for the Children's Inn at NIH, a home away from home for chronically ill children and their families while the child receives treatment at NIH. NIH Employees Day at the Children's Inn will be held on Tuesday, June 19, in conjunction with the annual Camp Fantastic Barbecue. Volunteers are needed to serve as hosts and hostesses, food servers, ticket sellers, etc., both the day of the event and prior to the event. If you would like to be involved in this special one-time event, call Kelly or Ruth in the R&W office, 496-6061. □

### Alcoholic Volunteers Sought

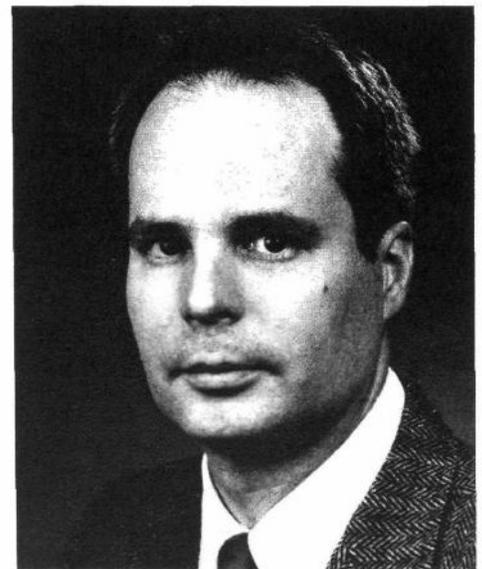
The National Institute of Mental Health seeks alcoholic volunteers who are not receiving treatment for depression. Participants will be paid; call 496-6982. □

### NIDR Needs Volunteers

The National Institute of Dental Research is looking for individuals who have cold sores or fever blisters for research studies. For more information call 496-0309. □



*Dr. Alfred Gilman, an NIGMS grantee and a distinguished researcher in the field of cellular communication, has been selected the 1990 Senior Laureate by the Passano Foundation of Baltimore. Since 1945, the Passano Foundation has annually honored persons who have made outstanding contributions to the advancement of medical science. Gilman, who last year won the Lasker Award, received his Passano Foundation award at a banquet in Baltimore Apr. 30.*



*Dr. Walter Schaffer has recently joined the Office of Extramural Research, OD, to serve as research training and research resources officer. He comes to NIH from ADAMHA's Office of Extramural Programs, where he spent more than 3 years as research training officer and deputy director of the Division of Program Analysis. Prior to that, Schaffer was with NIAAA, first as a staff fellow in the intramural program and then as executive secretary of the biochemistry, physiology, and medicine review committee. He has a Ph.D. in biochemistry from the University of Texas Health Science Center at San Antonio.*

## 350 Slots To Fill

### More Than 5,000 Attend NIH's First Job Fair

Some 350 positions in fields as diverse as accounting and woodcrafting went up for grabs Saturday, May 5, when NIH sponsored its first Job Fair. More than 5,000 job seekers turned out for the event, held under a tent constructed near the NLM entrance to NIH.

Clearly visible from Rockville Pike and marked by festive balloons, the tent attracted passersby as well as committed job searchers. Applications came from current NIH staff, recent college graduates, employees of other government agencies, and a variety of other mostly white-collar backgrounds.

"A line started forming at 7:30 a.m.," said Tom Flavin, NIH special projects officer; the event was not scheduled to begin until 10 a.m. "By 9:30 it stretched toward the Stone House."

At one point, Flavin counted 1,300 people waiting to get into the tent, where applicants could be interviewed briefly at tables set up by all but one of NIH's institutes. NIH was granted special "direct hire" authority by the Office of Personnel Management for the occasion. That meant that a person could be hired on the spot rather than off of a government register.



*Some 5,100 people passed through the NIH Job Fair tent on May 5. Business was brisk inside the tent, where various institutes, centers and divisions took applications and offered brief interviews.*

"Ten people that I know of were hired at the fair," said Marvene Horwitz, chief of the Recruitment and Employee Benefits Branch. "Lots more are definitely going to be hired."

Horwitz said that NIH has had direct hire authority in the past for such positions as engineer, computer scientist and medical officer, but that it had never been extended for jobs such as payroll assistant or purchasing agent.

As the day drew on, a serpentine line of potential employees wound toward the tent entrance.

"We were telling those who got impatient that it was better to spend an hour in line than to wait 3 months for a QRB (quality review board, which normally makes final hiring decisions)," said Flavin.



*The line to get into the Job Fair tent stretched many "feet" from the entrance. Three hundred fifty positions were open for application—many people were hired on the spot.*

Many applicants were still standing in line as 4 p.m., the hour the fair closed down, approached. Flavin said these people were able to submit resumes and SF-171s for consideration.

At around 2 p.m., local television station Channel 5 arrived to film a segment relating to a series it is doing on unemployment in metropolitan Washington. Flavin promptly put a reporter in touch with someone who had just been hired as a radiologic technician.

NIH used only print media and selected post offices and libraries to publicize the fair; no television advertising was used.

Inside the tent, which had been mildly damaged during a midnight thunderstorm the night before the fair, booths with job information were erected. Staff conducted short interviews, and offered information and job counseling. The Office of Research Services and NCI claimed the most exhibit space. Xerox machines and typewriters were available for those who needed them.

Among the positions seeking candidates were: audiologist, biologist, chemist, dietician, epidemiologist, insulator, mason, mathematician, nurse, pharmacologist and sheet metal worker.—Rich McManus □

### Help Available for Buying Bonds

A representative of the the Social Security Administration will be on campus May 17 from 9 a.m. to 1:30 p.m. to register minor children, grandchildren and other underage relatives for purposes of purchasing U.S. Savings Bonds through the payroll savings plan. The representative will be located outside the Bldg. 31 cafeteria in the hallway connecting 31A and 31B. For more information call Jack Patterson, 496-5345. □

### Demonstration Causes Temporary Detours; Shuttle Bus Reroutes

NIH will be the site of an AIDS demonstration on Monday, May 21, from 7 a.m. to noon at Bldg. 1. Sponsored by the gay rights group ACT UP, the demonstration entitled "Storm the NIH," is expected to draw 1,000 to 2,000 persons protesting the lack of an AIDS cure.

To ensure the safety of NIH personnel and property, the Division of Security Operations will close Bldgs. 1, 2, 3, 4, 6, 7, 8, 31, 36 and 37 that day. All persons entering these buildings will need to present their government identification cards to the police officer on duty.

In addition, Center Dr. between South Dr. and Memorial Dr. will be closed to all traffic; Wilson Dr. will be closed at East Dr.

As a result of these street closings, NIH shuttle buses will not service Bldg. 1 nor Bldg. 31 at the usual stops. Temporary shuttle stops to serve these buildings will be located behind Bldg. 1 on Memorial Dr. and at the corner of Memorial Dr. and Center Dr. Westwood and Executive Plaza shuttles that normally leave from Bldg. 31, will leave from the Memorial Dr. and Center Dr. temporary location.

### Two NIH'ers Elected to NAS

The National Academy of Sciences recently elected 60 new members in recognition of their distinguished and continuing achievements in original research. Election to membership in the academy is considered one of the highest honors that can be accorded an American scientist or engineer.

Of the 60 new members elected, NIH scientists numbered two: Dr. Edward D. Korn, chief, Laboratory of Cell Biology, NHLBI and Dr. Louis H. Miller, head, malaria section, NIAID. Also elected from ADAMHA was Dr. Howard A. Nash, chief, section on molecular genetics, NIMH.

The National Academy of Sciences is a private organization of scientists and engineers dedicated to the furtherance of science and its use for the general welfare. The academy, established in 1863 by a congressional act of incorporation and signed by Abraham Lincoln, calls upon the academy to act as an official advisor to the federal government upon request in any matter of science or technology.

The recent elections bring the total number of current members to 1,601. □